

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	PACKAGING COVER AND BOX
Attorney Docket Number::	2005-1031
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: MARCO EMANUEL
Middle Name::
Family Name:: VAN HEUGTEN
Name Suffix::
City of Residence:: HEESWIJK DINTER
State or Province of
Residence::
Country of Residence:: NETHERLANDS
Street of Mailing DAGERAAD 6
Address::
City of Mailing Address:: HEESWIJK DINTER
State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-5473 HD

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: ALPHONS MARIA
Middle Name::
Family Name:: VAN HEUGTEN
Name Suffix::
City of Residence:: LEUSDEN
State or Province of
Residence::
Country of Residence:: NETHERLANDS
Street of Mailing WATERLOOWEG 30 A
Address::
City of Mailing Address:: LEUSDEN

State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-3832 BX

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/NL04/00043	1/19/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
NETHERLANDS	NL 1022423	1/17/03	Yes

Assignment Information

Assignee Name::
Street of Mailing
Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::